



Supplemental Application Data Sheet

Application Information

Application Number:: 10/578,899
IA Filing Date:: November 11, 2004

Application Information

Application Type:: Regular
Subject Matter:: Utility
Suggested Classification::
Suggested Group Art Unit::
CD-ROM or CD-R?:: None
Number of CD Disks::
Number of Copies of CDs::
Sequence Submission?::
Computer Readable Form (CRF)?::
Number of copies of CRF::
Title:: VACCINE AND METHOD FOR
TREATMENT OF
NEURODEGENERATIVE DISEASES
Attorney Docket Number:: EIS-SCHWARTZ32A
Request for Early Publication?:: No
Request for Non-Publication?:: No
Suggested Drawing Figure::
Total Drawing Sheets:: 14
Small Entity?:: No
Latin Name::

Variety Denomination Name::

Petition Included:: No

Petition Type::

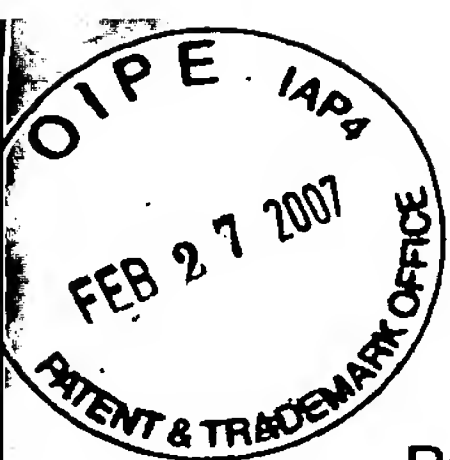
Licensed US Govt. Agency::

Contract or Grant Numbers::

Secrecy Order in Parent Appl.?:: No

Applicant Information

Applicant Authority Type:: Inventor



Primary Citizenship Country::	Israeli
Status::	Full Capacity
Given Name::	Michal
Middle Name::	
Family Name::	EISENBACH-SCHWARTZ
Name Suffix::	
City of Residence::	Rehovot
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	5 Rupin Street
City of Mailing Address::	Rehovot
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	76353
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israeli
Status::	Full Capacity
Given Name::	Ester
Middle Name::	
Family Name::	YOLES
Name Suffix::	
City of Residence::	Moshav Beit Gamliel Moshav Beit Gamliel
State or Province of Residence::	
Country of Residence::	Israel
Street of Mailing Address::	94 D.N. Nahal Soreq
City of Mailing Address::	Moshav Beit Gamliel Moshav Beit Gamliel
State or Province of Mailing Address::	
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	76880
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Israeli



Status::

Full Capacity

Given Name::

Oleg

Middle Name::

Family Name::

BUTOVSKY

Name Suffix::

City of Residence::

Beer Sheva

State or Province of Residence::

Country of Residence::

Israel

Street of Mailing Address::

28/25 Mivtza Asfa Street

City of Mailing Address::

Beer Sheva

State or Province of Mailing Address::

Country of Mailing Address::

Israel

Postal or Zip Code of Mailing Address::

84496

Applicant Authority Type::

Inventor

Primary Citizenship Country::

Israeli

Status::

Full Capacity

Given Name::

Jonathan

Middle Name::

Family Name::

KIPNIS

Name Suffix::

City of Residence::

Modiin

State or Province of Residence::

Country of Residence::

Israel

Street of Mailing Address::

3/1 Nahar Hayarden Street

City of Mailing Address::

Modiin

State or Province of Mailing Address::

Country of Mailing Address::

Israel

Postal or Zip Code of Mailing Address::

71700

Correspondence Information

Correspondence Customer Number::

001444

Representative Information

Representative Customer Number::

001444

Domestic Priority Information



Application::	Continuity Type::	Parent Application::	Parent Filing Date::
This Application	National Stage of	PCT/IL04/001037	11-11-04
PCT/IL04/001037	Appln claiming benefit of 35 USC 119(e)	60/518,627	11-12-03
PCT/IL04/001037	Appln claiming benefit of 35 USC 119(e)	60/610,966	09-20-04

Foreign Priority Information

Country::	Application Number::	Filing Date::	Priority Claimed::
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Assignment Information

Assignee Name::	Yeda Research and Development Co. Ltd.
Street of Mailing Address::	at the Weizmann Institute of Science, P.O. Box 95
City of Mailing Address::	
State or Province of Mailing Address::	Rehovot
Country of Mailing Address::	Israel
Postal or Zip Code of Mailing Address::	76100